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## BIB DATA SHEET

CONFIRMATION NO. 1495

|   |   |   |  |   |                           |                                |
|---|---|---|--|---|---------------------------|--------------------------------|
| <b>SERIAL NUMBER</b><br>10/529,770  | <b>FILING or 371(c) DATE</b><br>06/30/2006<br><b>RULE</b>   | <b>CLASS</b><br>128   | <b>GROUP ART UNIT</b><br>4148                                | <b>ATTORNEY DOCKET NO.</b><br>1501-1292 |                           |                                |
| <b>APPLICANTS</b><br>Angelica Malmberg, Kungsbacka, SWEDEN;<br>Katarina Lager, Goteborg, SWEDEN;<br><b>** CONTINUING DATA *****</b> No, O.H.<br>This application is a 371 of PCT/SE03/01351 09/01/2003<br><b>** FOREIGN APPLICATIONS *****</b> Yes, O.H.<br>SWEDEN 0202870.2 09/30/2002<br><b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b><br>07/24/2006 |   |   |  |   |                           |                                |
| Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>Verified and /OPHELIA ALTHEA<br>HAWTHORNE/<br>Acknowledged Examiner's Signature   |   | <input type="checkbox"/> Met after Allowance<br>OAH<br>Initials | <b>STATE OR COUNTRY</b><br>SWEDEN                            | <b>SHEETS DRAWINGS</b><br>5             | <b>TOTAL CLAIMS</b><br>20 | <b>INDEPENDENT CLAIMS</b><br>2 |
| <b>ADDRESS</b><br>YOUNG & THOMPSON<br>209 Madison Street<br>Suite 500<br>ALEXANDRIA, VA 22314<br>UNITED STATES  |   |   |  |   |                           |                                |
| <b>TITLE</b><br>Fluid collection pouch made of flexible plastic material for surgical drapes or towels  |   |   |  |   |                           |                                |
| <b>FILING FEE RECEIVED</b><br>1030  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |   | <input type="checkbox"/> All Fees                            |   |                           |                                |
|   |   |   | <input type="checkbox"/> 1.16 Fees (Filing)                  |   |                           |                                |
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